



Sign Permit Application

Campbell County and Municipal Planning & Zoning Commission

1010 Monmouth Street

Newport, KY 41071

Phone: (859) 292-3880

Fax: (859) 547-1868

www.campbellcountky.org

1. **PROJECT IS LOCATED IN** ☐ Unincorporated Campbell County, or in the City of ☐ California

☐ Crestview ☐ Dayton ☐ Melbourne ☐ Silver Grove ☐ Southgate ☐ Woodlawn

2. Name of business _____

Address _____

City, State, Zip _____ Phone _____

Fax _____ email _____

3. Owner of sign _____

Address _____

City, State, Zip _____ Phone _____

Fax _____ email _____

4. Sign contractor _____

Address _____

City, State, Zip _____ Phone _____

Fax _____ email _____

5. Applicant _____

Address _____

City, State, Zip _____ Phone _____

Fax _____ email _____

6. Type of sign: ☐ Pole sign ☐ Ground sign ☐ Building mounted sign ☐ Projecting sign

☐ Real Estate sign ☐ Entrance monument sign ☐ Other _____

7. Will sign be illuminated? ☐ Not illuminated ☐ Internal ☐ External (spot light)
8. Size (area) of sign _____ sq. ft. 9. Height of sign (above grade) _____ ft.
10. Road frontage of lot (free-standing signs only) _____ ft. 11. Lot size _____ acres
12. Building width (building mounted signs only) _____ ft.
13. Are there other existing or proposed signs on this lot? If yes, list the type and size of all signs:

14. (I/We) understand and agree that all construction work will be performed in accordance with this application, submitted drawings, and the Campbell County Zoning Ordinance.

Applicant's signature _____ Date _____

Sign owner's signature _____ Date _____

Part B (Submission Requirements)

1. One (1) copy of this application. Separate application required for each sign.
2. Three (3) sets of a site plan showing the location of all existing and proposed signs and all applicable requirements of the Zoning Ordinance.
3. Three (3) sets of signage drawings with the following information:
 - A. Height of proposed sign
 - B. Dimensions of signor signage area
 - D. Type of construction material.
4. Fee as per current Campbell County Zoning Fee Schedule.

INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL

APPLICATION NO. _____	FEES _____	DATE RECEIVED _____
Zoning _____	Zoning _____	<input type="checkbox"/> Approved <input type="checkbox"/> Approved with conditions
Building _____	Building _____	Date Issued _____ By _____
	Total _____	Rec. _____ <input type="checkbox"/> Check no. _____ <input type="checkbox"/> Cash

Zone _____ Classification of sign _____ PIDN 999-99- ____ - ____ . ____